

ATLANTA POLICE DEPARTMENT

Equipment Return Form

Employee's name _____ APD ID number _____ Assignment (division and section) _____ Date of employment _____	Rank or job Classification _____ Date of Employment _____ Years of Service _____ Termination of employment <input type="checkbox"/> Resignation <input type="checkbox"/> Retirement <input type="checkbox"/>
SSN _____	

Employee's work site
 This employee has turned in the following equipment in satisfactory condition and owes no other equipment to this section.

☐ Office keys
 ☐ Vehicle keys
 ☐ Parking card
 Other _____

Section Commander's Signature: _____ Date _____

Electronic Maintenance Unit
 This employee has turned in the following equipment in satisfactory condition and owes no other equipment to the Information Services Section.

Radio #: _____
 Pager #: _____
 Other _____

Unit Commander's Signature : _____ Date _____

Central Records Unit
 This employee has cleared any incident, accident, and other reports from ICIS and satisfied any need for corrections.

Unit Commander's Signature : _____ Date _____

Property Control Unit
 This employee has turned in the following equipment in satisfactory condition and owes no other equipment to the Property Control Unit.

<input type="checkbox"/> Flashlight and charger	<input type="checkbox"/> Badge #, including hat badge _____	<input type="checkbox"/> OC Spray
<input type="checkbox"/> Flashlight Holder	<input type="checkbox"/> Body armor # _____	<input type="checkbox"/> ID card
<input type="checkbox"/> Duty Belt	<input type="checkbox"/> Weapon Holster	<input type="checkbox"/> Official Business Parking Permit
<input type="checkbox"/> Ammo Pouch	<input type="checkbox"/> Handcuff Holder	

☐ Shirts _____
 ☐ Tie _____
 ☐ Coat _____

☐ Pants _____
 ☐ Hat _____
 ☐ Nylon
 ☐ Rain
 ☐ Leather

Mobile Field Force: ☐ Member has returned his/her equipment with exceptions listed (Attach copy of Form APD 271) ☐ Not a member

Miscellaneous Items _____

Property Intake: _____ Date: _____

Armory

<input type="checkbox"/> Service Weapon # _____	<input type="checkbox"/> Second Weapon # _____	Magazine <input type="checkbox"/> How many returned? _____
<input type="checkbox"/> Carrying Case	<input type="checkbox"/> Gun Safety	Rounds of Ammunition _____

Lock

Returned
Weapon
Holster

☐ ASP Baton #

☐ ASP Baton Holder

☐

Armory

Signature :

Date

:

Unit Commander's Signature : _____ Date ____ - ____

Personnel Services Unit

This employee has complied with APD.SOP.2131 and is authorized to have any final paychecks and pension refunds.

Unit Commander's

Signature :

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